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PTO/SB/30 (09-08)
Approved for use through 03/31/2007. OMB 0851-0031
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Request		09/886,296				
for	Application Number	09/080,290				
Continued Examination (RCE)	Filing Date	06/21/2001				
Transmittal	First Named Inventor	Tarara, Thomas E.				
Address to: Mail Stop RCE	Art Unit	1816				
Commissioner for Patents P.O. Box 1450	Examiner Name	Sharmila S. Gollamudi				
Alexandria, VA 22313-1450	Attorney Docket Number	NK.0054.10				
This is a Request for Continued Examination (RCE) a Request for Continued Examination (RCE) practice under 37 CF 1995, or to any design application. See Instruction Sheet for RC	- K 1 114 dage not annh (+a am i i	iiite oe nigat oeelissiiss Aled astest - t o				
Submission required under 37 CFR 1.114 Not amendments enclosed with the RCE will be entered in the applicant does not wish to have any previously filed unen amendment(a). Previously submitted. If a final Office action is considered as a submission even if this box is	te: If the RCE is proper, any previous order in which they were filed untered amendment(s) entered, app	ously filed unentered amendments and nless applicant instructs otherwise. If licant must request non-entry of such				
Consider the arguments in the Appeal Brief or Reply Brief previously filed on Consider the arguments in the Appeal Brief or Reply Brief previously filed on						
li Other						
b. Enclosed						
iii. Information Disclosure Statement (IDS)						
ii. Affidavit(s)/ Declaration(s) iv. Other						
2. Miscellaneous						
Suspension of action on the above-identified application is requested under 37 CFR 1.103(c) for a a. period of months, (Period of suspension shall not exceed 3 months; Fee under 37 CFR 1.17(i) required) Other						
The RCE fee under 37 CFR 1.17(e) is required by 37 CFR 1.114 when the RCE is filed. The Director is hereby authorized to charge the following fees, any underpayment of fees, or credit any overpayments, to Deposit Account No. 10-0258 I have enclosed a duplicate copy of this sheet.						
i. RCE fee required under 37 CFR 1.17(e)						
ii. Extension of time fee (37 CFR 1.136 and 1.1	17)					
iii. Other						
b. Check in the amount of \$enclosed c. Payment by credit card (Form PTC) 2038 enclosed						
C. Payment by credit card (Form PTO-2038 enclosed) WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.						
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED						
Signature	Date	December 6th, 2006				
Name (Print/Type) Ashok K. Janan	Regi	stration No. 37.487				
	MAILING OR TRANSMISSION					
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Name (Print/Type) Amy Wells						
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ATTENTION:

Examiner Gollamudi

GROUP ART UNIT:

1616

FIRM/CO. NAME:

United States Patent and Trademark Office

Application NO:

09/886,296

FAX NO:

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Please see the attached transmittal, amendment and RCE.

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of: Terara et al.

Application No: 09/886,296
Confirmation No: 6348

Filed: 06/21/2001

Group No: 1616

Examiner: Sharmila S. Gollamudi
Attorney Docket No: 0054.10

Wednesday, December 06, 2006

DEC 0 6 2006

Title: ENGINEERED PARTICLES AND METHODS OF USE

Wednesday, December 06, 2006
San Francisco, CA 94107

Commissioner for Patenta **Extension of Time** US Patent and Trademark Office VIA FACSIMILE ☑ Applicant petitions for an extension of time under 37 C.F.R. 1.136 (571) 273-8300 Papers Enclosed Extension (Months) Extension Fee Small Entity Large Entity ☑ Amendment and Marked Up Copy of Claims ☐ One Month \$120.00 \$60.00 **B**RCE Two Months \$450.00 \$225.00 ▼ Three Months \$1020.00 \$510.00 Total \$ 1020.00 D Applicant believes that no extension of term is required. However, this

conditional petition is being made in case applicant has inadvertently

overlooked the need for a petition for extension of time.

Fees for Extra Claims	Claims remaining after amendment	Highest number previously paid for	Number Extra			Additional Fee
				Rate		
				Large Entity	Small Entity	
Total Claims	34	37	0	\$50.00	\$25.00	\$0.00
Independent Claims	2	5	0	\$200.00	\$100.00	\$0.00
Multiple Dependent Claims			ŧ	\$360.00	\$180.00	\$0.00
Supplemental Information Disclosure Statement			·-			

Fee Payment		Fee Deficiency			
Extension Fees	\$1020.00	☑ If any additional extension and/or fee is required, please charge Deposit Account No. 10-0258			
Fees for Extra Claims	\$0.00	and/or			
RCE Fee	\$790.00	☑ If any additional fee for claims is required, please charge Deposit Account No. 10-0258.			
Total	\$1810.00				
□Attached is check noin the sum of \$0.00. ☑ Please charge Deposit Account No. 10-0258 in the sum of \$1810.00 CERTIFICATE OF TRANSMISSION (37 C.F.R. § 1.8a): I hereby certify that, on the date shown below, this correspondence is either being facsimile transmitted to the U.S. Patent and Trademark Office via Fax No. (571) 273-8300, or being deposited with the United States Postal Service as first class mail with sufficient postage, in an envelope addressed to: Mail Stop RCE, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450. By:		Nektar Therapeutics 150 Industrial Road San Carlos, CA, 94070			